BASKERVILLE
JUNIOR AUDITION FORM

Name of Child:	
Date of Birth:	
Home Address:	
Parent's Email Address:	
Contact Telephone No (Parent):	
School:	
Please give details of any medical conditions, allergies, mental health issues, and learning disabilities or difficulties your child has to ensure we are able to support their needs:	
I am a licensed chaperone:	YES/NO
I am not currently a licensed chaperone but would be interested in becoming one:	YES/NO
My child will not be available for rehearsals on:	
Your child must be available for all rehearsals and performances they are required for from May 2026 onwards.	

Applicable for those aged 14-18:
While those 16+ do not require a chaperone, we have a duty of care to those under 18.

Parts my child is auditioning for:	
My child is prepared to take a different role to that stated above:	YES/NO

I am the parent/guardian of *……. and I give permission for my child to take part in the pantomime and confirm they will be available for all rehearsals other than those specified above. I understand there is a £30 fee per child if they accept a part in the show and I have received and read the information sheet about rehearsals and performances.

Signed: *…… Date: *……

Full Name: *…….. (* please complete)

Please complete the attached social media permission form

BASKERVILLE
SOCIAL MEDIA FORM

For publicity purposes we would like to use snippets of rehearsals on The Oxted Players social media pages (Instagram and Facebook). This may include headshots, cast photographs, rehearsal photos, video clips of rehearsal, dress rehearsal photographs. Children's full names will not be printed onto any publicity material (with the exception of the programme).

Please sign against the below categories to indicate what you are happy for your child to take part in (to go onto The Oxted Players social media accounts). If a child does not want to be in something, this right to decline will of course be respected.

Please note that if you sign no to any of the below, your child(ren) will not be in that form of publicity. Without written consent to proceed, we will take it as permission not granted for your child.

Publicity Material	**Yes/No**
I agree to my child's first name being used. (Please note that second names will be used for the programme)	
I agree to the use of my child's headshot.	
I agree to the use of cast photographs including my child.	
I agree to use of rehearsal photographs including my child.	
I agree to use of video snippets of rehearsals including my child.	
I agree to use of dress rehearsal photographs including my child.	

I am the parent/guardian of*…….. and confirm that the above is correct.

Signed: * …… Date: *……

Full name: * …… (* please complete)